## EXHIBIT 4

YOUR RETURN MAILING ADDRESS NAME: E.C. PUBLICATIONS, INC.

CITY: BURBANK

ADDRESS: 2900 WEST ALAMEDA AVENUE

Dean C. Logan, Registrar - Recorder/County Clerk

Electronically signed by TODD TRAN

## STATE: CA ZIP CODE: 91505

FICTITIOUS BUSINESS NAME STATEMENT

			PE OF FIL	ING AND FILING	EE (Check one)			
X	Original- \$26.00 (FOR ORIGINA	AL FILING WITH ONE BUSINESS	NAME ON STA	TEMENT)				
		IGES IN FACTS FROM ORIGINAL		JIRES PUBLICATION)				
		IN THE FACTS FROM ORIGINAL I						
\$5.	00 - FOR EACH ADDITIONAL B	USINESS NAME FILED ON SAME					TIONAL OWNER IN EXCES	S OF ONE OWNER
		The t	ollowing p	erson(s) is (are) o	loing business a	as:		
*1	DC			2				
** 4	1000 WARNER BLVD.			Print Fictitious	Business Name(s) 1 2900 WFS	ST ALAMEDA AVEN	UE	
-		Street address of principal place of	business				ress if different	
Burb	oank	CA	91522	LA COUNTY	Burbank		CA	91505
City		State /Country	Zip	COUNTY	City		State /Count	ry Zip
	cles of Incorporation or Organizat EGISTERED OWNER	tion Number (if applicable): AI #ON R(S):	-					
1.	E.C. PUBLICATIONS,	INC.		2.				
٠.	Full Name/Corp/LLC (P.O	Box not accepted)			Full Name/Corp/L	LC (P.O. Box not accept	ed)	
	2900 WEST ALAMED	A AVENUE						
	Residence Address				Residence Addre	ess		
	BURBANK	CA	91505		-			
	City NY	State/Cour	ntry Zip		City		State/Country Zi	p
		nt State of Incorporation/Organ	nization		If Corporation as I	LLC - Print State of Inco		
	ii corporation of 220 - 1 11	nicolate of incorporation/organ	lization		ii Corporation or t	LLC - Print State of Inco	rporation/Organization	
3.				4.				
	Full Name/Corp/LLC (P.O.	Box not accepted)			Full Name/Corp/L	LC (P.O. Box not accepted	ed)	
	Residence Address				Residence Addres	99		
					Nosidonos Addres	33		
	City	State/Countr	y Zip	-	City		State/Country Zip	)
	#0		,					
		nt State of Incorporation/Organ		ATT 4 OUL 4 D D IT 16		LC - Print State of Inco		
****		MORE THAN FOUR REGI CONDUCTED BY: ((			NAL SHEET SH	IOWING OWNER IN	FORMATION	
				·		_		
	an Individual	a General Parti		a Limited I	Partnership	a Limited Liab	oility Company	
	=	rated Association other tha		ship [	x a Corporation	a Trust	☐ Copartners	
	☐ a Married Cou	uple Joint Vent	ure	State or Loca	Registered Dom	nestic Partners	a Limited Liabil	ity Partnership
*****	The date registrant starte	d to transact business und	er the fictition	ous business name	or names listed	above: N/A		
	-						if you haven't started to trans	sact business)
		I declare th	nat all infor	rmation in this sta	tement is true a		,	
	(A registrant	t who declares as true any	material ma	atter pursuant to S	ection 17913 of th	he Business and Pro	fessions Code that	
	the registran	t knows to be false is guilty	oi a misde	emeanor punisnabi	e by a fine not to	exceed one thousan	d dollars (\$1,000).)	
REGI	STRANT(S)/CORP/LLCNAM	ME (PRINT) E.C. PUBLICATION	ONS, INC.			TITLE Vice Presiden	t	
DECL	CTDANT CIONATURE	A. Ku						
	STRANT SIGNATURE					NAME JAY KOGAN		
II COR	poration, also print cor	porate title of officer. If I County Clerk of LOS ANGELE	LLC, also p	orint title of office	r or manager.	e simble		
NOTIO	CE - IN ACCORDANCE WIT	H SUBDIVISION (a) OF SECT	TION 17920	A FICTITIOUS NAME	STATEMENT GET	NERALLY EXPIRES AT	THE END OF FIVE VE	ADS EDOM
THE D	DATE ON WHICH IT WAS F	ILED IN THE OFFICE OF THE THE FACTS SET FORTH IN T	E COUNTY C	LERK, EXCEPT, AS	PROVIDED IN SUF	BDIVISION (b) OF SECT	TION 17920 WHERE IT	EXPIDES 10
A REC	SISTERED OWNER. A NEV	W FICTITIOUS BUSINESS NA	ME STATEN	MENT MUST BE FILE	D BEFORE THE EX	XPIRATION. EFFEÇTI	JE IN THE RESIDENCE /E JANUARY 1, 2014. T	ADDRESS OF
FICTION	CIOUS BUSINESS NAME S	TATEMENT MUST BE ACCO	MPANIED BY	Y THE AFFIDAVIT O	IDENTITY FORM	¥0		-
THE F	ILING OF THIS STATEMEN	NT DOES NOT OF ITSELF AU	THORIZE TH	HE USE IN THIS STA	TE OF A FICTITIO	US BUSINESS NAME I	N VIOLATION OF THE I	RIGHTS OF
ANOT	HER UNDER FEDERAL, ST	TATE, OR COMMON LAW (SE	E SECTION	14411 ET SEQ., BU	SINESS AND PROF	FESSIONS CODE)		
	DEAN C. LOGAN JOS	THAT THIS COPY IS A C ANGELES COUNTY CLE	ORRECT C	COPY OF THE OR BY:		ENT ON FILE IN MY	OFFICE.	Danisti
Rev		D. BOX 1208, NORWALK, CA			62) 462-2177	WER ADDR	ESS-LAVOTE NET	, Deputy

This is a true and certified copy of the record if it bears the seal, imprinted in purple ink, of the Registrar-Recorder/County Clerk

NOV 0 4 2019

Deauc. Losus REGISTRAR RECORDER COUNTY CLERK LOS ANGIELES COUNTY, CALIFORNIA

YOUR RETURN MAILING ADDRESS

NAME: E.C. PUBLICATIONS, INC

ADDRESS: 3000 WEST ALAMEDA AVE. UNIT 119

CITY: BURBANK

STATE: CA

ZIP CODE:91505

2024224593



FILED 10/30/2024 EXPIRES 10/30/2029

DEAN C. LOGAN, REGISTRAR-RECORDER/COUNTY CLERK Electronically signed by CARINA CHEN

## **FICTITIOUS BUSINESS NAME STATEMENT**

		The following person	n(s) is (are) doing bu	siness as:	
1.DC		2	3 4		
Fictitious Business Name 4000 WARNER BLVD.				*//.	
Street address of p	orincipal place of business	50 5,1		01522	I A COUNTY
Burbank	/		CA State	91522 Zip	LA COUNTY
Articles of Incorporation or Organization	Number (if applicable): Al	#ON			1111
REGISTERED OWNER(S):				^A.	
1. E.C. PUBLICATION	NS, INC.	7   4.01	Maria 25	TIMA	
Full Name/Corp/LLC (if Corp/LLC mu 2900 WEST ALAM			Full Name/Corp/LLC		
Business Mailing Address (if Corp. or BURBANK	LLC enter the physical add CA	91505	Business Mailing Addres	s (if Corp. or LLC enter the phy-	sical address of the Corp./LLC)
Business Mailing City NY	Business Mailing Sta	The second secon	Business Mailing City	Business M	ailing State Business Mailing Zip
If Corporation or LLC - Print State of	Incorporation/Organization		If Corporation or LLC - F	Print State of Incorporation/Org	anization
	I declare	e that all information material matter pu	n in this statement is	true and correct.	haven't started to transact business and Professions Code to thousand dollars (\$1,0
REGISTRANT/CORP/LLC NAME (PRINT)	E.C. PUBLICA	TIONS, INC.	CLL	TITLE SECRETAR'	Y
REGISTRANT SIGNATURE			RP OR LLC, PRINT NAM	MECLARE M. CO	ONROY
If corporation, also print corpo This statement was filed with the County				rner.	
NOTICE - IN ACCORDANCE WITH SUI WHICH IT WAS FILED IN THE OFFICE IN THE FACTS SET FORTH IN THE ST. FICTITIOUS BUSINESS NAME STATEM ACCOMPANIED BY THE AFFIDAVIT OF	OF THE COUNTY CLERI ATEMENT PURSUANT T MENT MUST BE FILED B	K, EXCEPT, AS PROVIDED O O SECTION 17913 OTHER	IN SUBDIVISION (b) OF SECT THAN A CHANGE IN THE RES	TION 17920, WHERE IT EXP SIDENCE ADDRESS OF A F	PIRES 40 DAYS AFTER ANY CHAP REGISTERED OWNER. A NEW
THE FILING OF THIS STATEMENT DO UNDER FEDERAL, STATE, OR COMMO				INESS NAME IN VIOLATIO	N OF THE RIGHTS OF ANOTHER
I HEREBY CERTIFY THAT THIS VERIFIABLE BY GOING TO LAV					
			BY CARINA CH	EN	. Deputy

DEAN C. LOGAN, LOS ANGELES COUNTY CLERK

P.O. BOX 1208, NORWALK, CA 90651-1208